

**DEPARTMENT OF
PUBLIC HEALTH AND HUMAN SERVICES**



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DATE: June 25, 2008

TO: Mike Sadowski, CEO
Judy Stewart, RSC Board President

FROM: Denise Smith, QIS, DDP

RE: Quality Assurance Review for FY '08

Enclosed is the report for the Quality Assurance Review for Ravalli Services Corporation for Fiscal Year 2008. I appreciate the coordination and support that your staff provided that facilitated this review. As we all know, this has been a difficult year for Ravalli Services. I am please to say however, that during this review there were many positive changes being implemented that will increase the quality of services to consumers and ensure the stability of the organization.

Due to the upheaval that RSC has incurred during the last 20 months it was the decision of this department to complete the annual review with the understanding that a mid-year review would also occur in 6 months to better reflect the positive changes currently being implemented.

If you have any questions regarding the information reported in this review please do not hesitate to contact me at 329-5428

cc: Paula Tripp, Region V Manager, DDP
Jeff Sturm, Program Director, DDP (report only)
Tim Plaska, Bureau Chief, DDP (report only)
John Zeeck, Quality Assurance Specialist, DDP
Perry Jones, Waiver Training Specialist, DDP (report only)
DDP Contract File

RAVALLI SERVICES CORPORATION (RSC) QUALITY ASSURANCE REVIEW FY '08

Scope of Review

The FY '08 annual Quality Assurance Review for Ravalli Services Corporation (RSC) was conducted by DDP Quality Improvement Specialist, Denise Smith. The review was performed the weeks of April 14, 2008 through April 28, 2008. RSC provides services to individuals with a wide range of developmental disabilities and medical needs throughout the Ravalli County. RSC provides the following services: Two Community Homes, One Supported Living Facility, Work/Day Services, Supported Employment, Community Supports, Adult Foster Care and Transportation. RSC also runs a thrift store which offers many opportunities for employment and training to their consumers. RSC provides Community Supports services to 20 individuals who have funding through the Community Supports Waiver. This review encompassed an onsite review, a file review plus interviews with consumers and staff from every service listed above.

General Areas

ADMINISTRATIVE

SIGNIFICANT EVENTS FROM THE AGENCY-

It has been a year and a half of transition and some turbulence for this agency. Ravalli Services Corporation (RSC) had been without a CEO from the fall of 2006 until April 2007. The agency was managed by members of the management team until April 2007. At that time the Board hired a CEO who subsequently left the agency November 2007. A temporary Acting Vice President was installed until February 2008 at which time the current CEO, Mike Sadaowski was hired. Additional significant events that occurred during the past year include the following:

- All consumer work areas were moved from the main center to alternate sites.
- All work related to the Thrift store were relocated to different buildings, increasing space and the potential for productivity.
- Work Activity Center (WAC) changed its name to Day Activity Center (DAC).
- Seniors were moved from a group home setting to the Day Activity Center.
- RSC contracted for psychiatric services through AWARE Inc. with Dr. Reyes.
- Two new mini vans were purchased.
- Services were expanded to include Adult Foster Care.
- All group homes were licensed.
- The agency is in the process of updating computers for the various sites.
- The agency is investigating purchasing Therap Services to assist with Incident Management documentation and process.

Annual Licensing:

Licensing for RSC's group home sites took place in August 2007. RSC met all licensure requirements and both group homes were re-licensed for an additional year.

Fiscal:

RSC does not have their current Audit review back for this year. Last years audit review had several findings which were satisfactorily responded to by RSC. Both audits were conducted by Loren W. Randall, P.C. This year's annual audit will be reviewed once the agency receives it from the auditor.

SPECIFIC SERVICES REVIEWED

RESIDENTIAL AND SUPPORTED LIVING

RSC operates 2 community group homes, Riverview and Tammany, a Supported Living site that is generally called The Duplex and one Adult Foster Care home. Riverview has been designated as an intensive group home but due to the needs of the consumers both group homes have been staffed at an intensive level throughout the year.

For the purpose of this review all sites were reviewed. The exterior and interior of all sites were well maintained. They were decorated and furnished as homes with the consumer's personal touches evident throughout the home. In the common areas the homes were comfortable and clean. Each individual's bedrooms were individually decorated and the consumer had choice regarding the color that the room was painted.

The foster home was a beautiful home, clean and in a beautiful setting.

All sites met DDP requirements in the areas of water temperatures, fire safety, and appropriate egress and met state guidelines. Personal bathing effects were stored separately

During the past six months RSC has significantly improved in the area of communication between all service sites. Group home managers and staff work closely with the staff from other areas to ensure that all staff are informed regarding the daily status of each individual in service inclusive of behavior and medical needs. RSC's communication regarding consumers care needs and response time to provide immediate and comprehensive care has been excellent. They are timely and appropriate when notifying this reviewer and detailed in their follow-up reports. Consumers at RSC receive excellent care. (QAOS RSC-01)

HEALTH AND SAFETY

Health and Safety

RSC provides services to a number of individuals with mild to moderate health and/or medical issues as well as a few individuals who have significant mental health issues. In each consumer's file there is documentation of care that is completed each day for every group home resident that pertains to their individual health needs. This documentation

can include personal hygiene, bodily functions, sleeping patterns and general health and wellness. In addition, there are many individuals in the group home that are receiving nursing grants to assist with some of their re-occurring health care needs.

The Adult Foster Parent recently resigned as one of RSC's Group Home Managers. She is very skilled and understands the importance of documenting all of the programs that she and her adult foster resident work on a daily basis.

Medication Administration Records (MARs) were reviewed in each site visited during the annual review. All records contained lists of current medications as well as PRN medications that each consumer was currently prescribed. Documentation was thorough and up to date in the MARs with only medication certified staff assisting consumers with their medications. Medications are properly stored with psychotropic medications double locked. There were programs towards independence in taking medication as appropriate and maintenance programs for those who had achieved maximum independence. Protocols existed for PRN medication in every reviewed file.

Due to the method/computer program in which RSC documents incidents it is very difficult for them to sort out specific incidents for data review (system was originally recommended by DDP). This includes their method of documenting and recording medication errors and determining trends. When asked, the agency was unable to run a report documenting medication errors and trends. This is a requirement of the DDP Incident Management Policy. Review of Incident Management meeting notes and these reviewer's notes do not indicate an abnormal incident of medication errors. Of a 12 month review there were approximately 1.5 medication errors per week or 6 medication errors a month averaged over the 12 months. From the information compiled it was difficult to determine a trend analysis but it appeared that the majority of errors related to documentation errors and not error of administration. Medication errors are reviewed at every Incident Management Committee. When a particular individual has more than two errors in a month the site supervisor reviews the medication protocols with the staff and the staff and supervisor to sign off that these protocols have been reviewed. RSC is in the process of purchasing THERAP which will resolve many of these tracking and documentation issues. However, until they have a better system in place RSC will need to devise a way to track and document medication errors. (QAOS RSC-02)

As mentioned previously the structures and furnishings of the community group homes are in good repair. All homes were very clean, organized, and offer a very homey atmosphere with individualized themes. The yards and the exteriors were in excellent shape.

Emergency evacuations are conducted and documented monthly at all residents. Times of drills varied between all shifts including the night shifts.

Protocols for bathing were listed in every file for every consumer. It was recommended by this reviewer that a statement be posted in each bathing site that states that bathing protocols can be found in each individual's file and that the file needs to be brought into the bathroom at the time the consumer bathes.

The water temperature was tested at all sites. The water temperature ranged from 100-112 degrees which is within an acceptable range.

All staff interviewed were able to report on the emergency back up plan and reported that it was efficient.

SERVICE PLANNING AND DELIVERY

Individual Planning

RSC provides services to a population with a very wide range of skills and needs. There are several consumers with significant mental health issues. On the other end of the spectrum they provide services to consumers that require total care and that are non-verbal and use alternate means of communication. RSC uses a variety of tools for assessment that are primarily geared towards those individuals with significant developmental disorders. Due to the wide range of abilities of those individuals in services it could be beneficial to those consumers with dual diagnosis if RSC adopted some assessments that were more appropriate to assess their needs.

The IP meetings are consistently attended by the Group Home/Supported Living Site Managers, Vice President-Director of Services and either the Day Activity Center Manager or the Processing Center Manager. Families and Advocates of the consumers are invited and encouraged to attend. RSC does an excellent job in ensuring that all consumers attend and participate in their IP meetings and with the Case Managers support ensure that every consumer in services invites who they would like to participate in the meeting. (QAOS RSC-03) Due to the staffing schedule of RSC the program managers work directly with each consumer on a daily basis. They know each consumer's strengths and need for supports thereby fulfilling the role of a direct care staff at the meeting. However, every consumer invites who they want to participate in their IP and direct care staff are frequently invited.

A concern noted during the review for both group home sites was that IP objectives were not being modified as needed. One example of this situation was with a consumer that uses an augmentative communication device. The device had been broken, repaired then broken again and the consumer was unable to work on several objectives as written. A special IP had not been held to address this need and to modify or adapt his programs. This was a huge concern because the broken communication device affects all aspects of this individual's life, not just those related to the objectives. Another individual had an objective related to using the internet but the internet was not working. In another individual's file there were large gaps where the program had not been run according to the written criteria. In addition, many consumers only had 1-2 objectives that they were actually working on with any frequency. (QAOS-RSC 04)

Another concern noted during the file reviews were that information was not updated across all files. In one situation the consumer's file listed that he was living with his mother when in actual fact he was living at an RSC residential program. Though oral communication is good and continuing to improve in all areas the written exchange of information also needs to be kept up to date and current. (QAOS-RSC 05)

RSC had done an excellent job of completing their quarterly reviews this year. They have been timely and complete.

Consumer Satisfaction Surveys are in all IP's reviewed.

Leisure/Recreation

Leisure and recreational activities are monitored and documented in every consumers file but do not truly reflect the extent that RSC provides community integration and opportunities for outings. The Residential and Supported Living site staff offer a wide variety of group and individual activities in which folks can and do participate. The staff and consumers are going out every day and participating in community events. Consumers go shopping, to the health club, to the fair and rodeos and out to visit friends and families. They are to be commended for the extent that they seek out activities that their consumers can engage in within the community as well as the on-site activities that they arrange such as bowling, bingo and dances. (QAOS-RSC 06)

Rights Restrictions/Client Rights

Consumers interviewed understood their rights. They were able to state what their rights were and stated several options of who they could go to if they felt that their rights had been violated. They were very clear who they liked and who they did not! It was clear that most consumers felt a close connection with their direct care staff and felt that they were safe people to go to if there were problems. Every one stated that they felt that their privacy was respected. Several individuals stated that they could go to their Case Manager or their APS worker if they did not like something that was occurring. Other individuals were still living in the home situation and were utilizing natural supports such as family members.

There are currently several rights restrictions in place in Residential and across Day/Processing Services. All of the restrictions are related to health matters. One individual is on a food and liquid restriction and also cannot take long hot showers due to health concerns. There are programs in place that give the consumer choice with her menu and shower times. Another individual is on a liquid restriction and has to be monitored very closely. One consumer with significant mental health issues has a right's restriction related to the cleaning of her room. This rights restriction simply states that if the consumer does not clean her room a minimum of one time a week that group home staff will clean the room. This was due to significant health and safety issues for both the consumer and all other residents in the group home. This consumer has numerous positive supports in place to assist her in cleaning her room throughout the week.

STAFFING

All staff files reviewed indicated completion of all Criminal Background Checks. RSC uses a nationwide data base that is very comprehensive. This data base also has the capability to check all states for criminal history. Their orientation and training requirements are overseen by the Human Resource Director as well as each individual site supervisor. Orientation includes information and training in Client Rights, Incident Reporting, and Confidentiality as well as specific site requirements. There are also

mandatory trainings that staff must attend or complete within a specified time period. These include specific Company Orientation, First Aid/CPR, and MANDT. These are in addition to the College of Direct Supports on-line training and the Medication Certification that the state requires.

RSC does not have a MANDT trainer and currently contracts with another agency who provides the MANDT training. This arrangement appears to be working out and MANDT certification is completed on a timely basis.

At the time of the on-site review portion of the Annual Quality Assurance Review all staff files reviewed had complete records for all Orientation and Annual Training, Criminal Background Checks. Also included were CPS and Motor Vehicle background checks. All staff had completed the required modules through the College of Direct Supports.

As stated previously the past year had been a year of transition and turmoil for this agency. Staff to client ratios had been a concern. Several investigations were completed during the past year that revealed inadequate staffing patterns. Since the advent of the new CEO and increased stability within the organization this has no longer been a concern.

Staff surveys and interviews were completed with staff across all sites. This included Group Home evening staff, Group Home day staff, Day Activity and Processing staff, Supported Living staff, Community Supports staff and Supported Employment staff. Answers to the sections of the survey that involved consumer rights, orientation training, supervising medications, Individual Plans, and incident reporting were excellent. Previous interviews with staff during past investigations had indicated some concern regarding their knowledge of the consumers special needs with diets, medication etc. During this review staff were knowledgeable regarding specific dietary needs and programmatic issues. In fact, staff are to be commended for their knowledge and caring responses regarding individual consumers. All staff consistently responded with very thoughtful and caring responses that not only expressed concern for the health and safety of the consumers, but were also very respectful.

One area that RSC will have to address is training on reporting Abuse and Neglect. When asked about RSC's reporting protocol many staff responded that they would go to their supervisor, to the consumer's Case Manager or the CEO if they ever observed what they thought was neglect or abuse of a consumer. Only one individual clearly stated that he was a mandatory reporter and would go to Adult Protective Services. (QAOS RSC-07)

INCIDENT MANAGEMENT

RSC holds weekly Incident Management Committee meetings that are consistently attended by the CEO, the Vice President-Program Director, Group Home, Supported Living, Supported Employment and other management staff. RSC is currently investigating the purchase of the THERAP system which will greatly enhance their ability to respond and track specific types of incidences. They currently have a great deal of difficulty tracking and organizing information and THERAP will assist them in the

management of reporting and tracking incidents involving their consumers and/or staff.

Work/Day/Community Employment

RSC has several sites where Work/Day and Community Employment services are delivered. There is the Day Activity Center, the Processing Center, Thrift Store, recycling and various Community work sites. The initial review of services at the Day Activity Center (previously known as the Work Activity Center) indicated many programmatic concerns. These concerns included providing meaningful activities and documentation. In the past several months however RSC has significantly changed their Day programs. They have moved their Senior/Retired program from the Group Home to the main facility where the Work Activity Center had previously been situated and moved all work to the Processing Center. In addition, they hired a new manager for their Day Activity Center who has implemented activities that are fun and stimulating for the consumers. These activities have included planting/gardening, painting a huge mural on the wall, music and reading plus weekly outings and guests for music and reading. Consumers that were at the old Work Activity Center now have vocationally related activities versus “busy work” such as puzzles and sorting. The physical site of the Day Activity Center is clean bright and well organized. The site itself has some drawbacks. It is a large room that carries sounds easily. There are plans to put in areas that relate to various activities. This will decrease the sound volume and provide some quieter areas for those consumers that need less stimulation during the day.

The Processing Center provides many vocational opportunities for consumers regardless of their skill level. Within the Processing Center there are numerous work activities that occur. These include but are not limited to: unloading donated items, sorting, cleaning, pressing, tagging, taking off buttons and working in the Thrift Store. These work activities are meaningful work activities and there are enough activities that consumers can rotate to those areas of choice. Consumers are paid according to production and many of them receive a significant paycheck. The staff are very sensitive to the needs of the consumers in all areas of work and other alternatives are presented to these consumers as needed, such as going home, going for a walk, going on an outing. RSC provides many choices for the consumers receiving services. If a consumer does not want to go into the center they are usually given the option of remaining at home or coming in later. Typically this occurs with only one Group Home resident as most consumers do not want to stay at home and are excited about going to work.

HEALTH AND SAFETY

All work sites follow the same protocols for medication as the residential sites. Medication administration occurs in a separate area than the other activities. Only one consumer is allowed in the room at a time while taking their medication. All medication is locked up with all psychotropic medications double locked. Medication logs were up to date and correct.

There were no fire drill data sheets available for either the previous Work Activity site or the processing site. This reviewer was informed that the fire drills had occurred but either the fire drill data sheets did not get submitted or they were lost. During staff interviews

the staff were able to identify fire drill procedures and did state that fire drills had occurred but could not answer as to the frequency of the drills. All fire extinguishers had been charged and the site had been visited by the Fire Marshall. All exits were clearly marked however, documentation of the fire drill is necessary and provides valuable information directly relating to the health and safety of the consumers. This is a serious deficiency in health and safety standards and should be immediately rectified. (QAOS-RSC 08)

SERVICE PLANNING AND DELIVERY

Individual Planning

Individual Plans were reviewed as part of the annual quality assurance review. At the time of the review there were major concerns regarding documentation in the Work Activity Center that programs were not being implemented as written. In several of the consumer's files there was no documentation that an objective had ever been implemented and no modification of those objectives. For other's there were large gaps in documentation. It appeared from the file review that for some consumers there were no activities occurring. This was discussed with RSC management staff and they were aware that this had occurred and were in the process of rectifying this situation. (See QAOS-RSC 04) File reviews for all other work services that included the Processing Center, the Thrift Store and Community Work sites revealed that objectives were implemented as written and documentation was occurring.

Two consumers were interviewed that receive both community work services and group work services. Both consumers stated that they feel very supported in the community. They are very satisfied and proud of the work that they perform in the community. Supports for these consumers are very flexible by the Supported Employment staff. They provide supports when needed but are very conscious of allowing the consumer their independence in the work place. It appeared from communication between staff, consumers and work sites that this is very much a team process that is very successful.

STAFFING

See above information related to training and orientation.

Staff-to-consumer ratios have been checked throughout the year by observation. The ratio has not always been at levels in accordance with Appendix I and a QAOS was submitted at that time. Since the reorganization, the staff to consumer ratio has been in accordance with the Appendix I.

COMMUNITY SUPPORTS

RSC provides Community Supports to twenty individuals. Every consumer has a different array of supports and services that meet the individual needs. The majority of consumers purchase Day/Work services and transportation. See STAFFING above for review of employee files.

HEALTH AND SAFETY

Two individuals receiving Community Supports were interviewed. Both individuals were able to address their rights. One individual stated that they would go to Adult Protective Services if they felt that their rights were being violated. The other individual has natural supports and would go to them as needed. Both individuals felt safe in the services that they were receiving. See Day/Work services for review of Health and Safety as it relates to medication administration and storage.

SERVICE PLANNING AND DELIVERY

Individual Plans

Five files were reviewed for Community Supports. For individual's receiving services through the Work Activity Center there were deficiencies in the documentation of data regarding the implementation of objectives. (See QAOS-RSC 04) Files reviewed for consumers receiving services in the work services in the Community were complete and data available demonstrating implementation of objectives. One individual had not accessed any Community Supports services. This individual and his family have been contacted to determine if another agency could meet his needs or perhaps other services purchased through their Community Supports Agreement.

TRANSPORTATION

RSC is to be commended for the transportation services that they provided to their consumers. This past year RSC transported from Stevensville to north of Hamilton. The transportation made it possible for consumers who lived at home in rural areas with working parents to receive services. (QAOS-RSC 09) This was very expensive in both staff time and vehicle costs and the agency may not be able to continue providing this level of transportation in the upcoming year.

RSC has quite a large fleet of vehicles for the size of the agency. This is in part due to the vehicles related to the recycling center. Their fleet includes trucks, vans and buses. Transportation orientation is completed by each site supervisor. Human Resource runs a Montana Motor Vehicle check on every person hired and is discussing running one on an annual basis for updates. Transportation logs are kept for each vehicle monitoring the need for repairs and preventative maintenance. Review of the transportation logs revealed that they are either not completed at all sites or are not sent into the main office as required by their policies. There also did not appear to be a system to double check that requested repairs had been completed thereby ensuring the consumers health and safety. This is a health and safety issue as well as a training issue with staff. (QAOS-RSC 10)

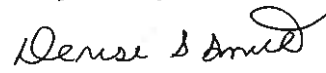
CONCLUSION

RSC has had a difficult and turbulent year. However with the dedication of several committed staff that stayed during this difficult time and the reorganization spearheaded by the new CEO, RSC is quickly taking care of issues that were evident this past year and

during this review. For the majority of QAOS's written, RSC has already made changes to rectify the deficiencies noted. In every area reviewed from orientation to service delivery improvements have occurred. This reviewer was impressed with the dedication of RSC's staff from the management staff to the direct care worker.

As noted previously a mid-year review will be completed that will reflect the positive changes that have been implemented during the past few months.

Respectfully Submitted,

 /QIS